

SPONSOR:
Please attach this form to your
Apprenticeship Program Standards

Pursuant to KRS 343.020 (3) any modification of change to a registered program shall be promptly submitted to the registration office and, if approved, shall be recorded and acknowledged as an amendment to such program.

Apprenticeship Standards

AMENDED INFORMATION

 (Program Number)

 Address

 (Contact Person)

 (Contact Phone)

 (Date)

TRADE	DOT Code	DOT Symbol	Term in Months or Hours	Journey Workers Employed	ApprenticeE mployed	Journey Workers Rate	Hours Per Day	Day Per Week

Apprentice wage schedule (Wage rate by percentage unless otherwise indicated)

Trade (as shown above)	Interval	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th	13th	14th

 (Sponsor Signature)

 (Date)

Reviewed, approved and registered by the Supervisor of Apprenticeship and Training, Division of Employment Standards, Apprenticeship and Training. Kentucky Department of Labor, and the Kentucky Apprenticeship and Training Council in cooperation with the Bureau of Apprenticeship and Training, U S. Department of Labor.

 (Supervisor of Apprenticeship and Training)

 Date Approved

APP55